DISCLOSURE SUMMARY PAGE	(Rev. 01/98) DISCLOSURE REPORT
	A ETHIC FAR Office Use Only
COMMITTEE NAME (Must be same as on Statement of Organization)	Comm. 9/3/ Indexed 5 Audited 10
IMPORTANT: Indicate type of committee you are reporting for:	
(1) Statewide/Legislative Candidate (2) Statewide PAC: 3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support State of Candidates	Computer
Nouna & Cum 112-527-28	310
SIGNATURE OF TREASURER (or person filing this report) TELEPHONE	DATE SIGNED
Routine Penalties Due For Late Filed Reports Rang	e from \$20 to \$800
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTEN	ICE:
0 1 = + (0 1)	ELECTION /(2)NON-ELECTION YEAR. Indicate one
CHECK IF AMENDMENT TO REPORT DATED	Local Committees, enter Date of Election
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a Notice of Dissolution is filed.)	County & Local Committees, enter County in which Election is held
STATEMENT OF CASH ON HAND	
CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)	s 887.84
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A)	470.00
Schedule F: Loans Received total (Attach Schedule F)	
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	
(Schedule Happlies to Candidates' Committees Only)	ncha act. 1.14
	DTAL\$ 1358.98
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B)	225.00
Schedule F: Loan Repayments total (Attach Schedule F)	
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	<u>1/33.98</u>
UNPAID BILLS (From Schedule D - Attach Schedule D)	\$
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	
OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	
CANDIDATE COMMITTEES ONLY:	
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES NO
VALUE OF CAMPAIGN PROPERTY (From Schodule L. Attach Schodule L.)	

FOR INSTRUCTIONS, SEE BACK OF FORM

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Mills Co. Comocratic Committee

SCHEDULE A (Rev. 02/96)	MONETARY RECEIPTS		
CHECK THIS BOX IF AMENDING FORM			

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT
RECEIVED	(if applicable)		TO CANDIDATE*	RECEIVED
(MM/DD/YR)	AND PAC CHECK		(if applicable)	
	NUMBER			
9/ /	ID#	Forest 41/aybelly		
1//3/	CK#	1 n. Deepel		\$ 00
1708	CN#	Glenewood. Da 51534		10
l	ID#	1: 12 1.		70
		Jam Webering RO		00
	CK#	151236 aston		
		Glenwood la		100
	ID#	Rustinken		
		311645 Orasmin on		, 00
.	CK#	24000		25
	ID#	Elenwood, Il		フュ
	10#	Jean slavn		
	CK#	1905 4 Walnut		30
		Hen von la	-	25
	ID#	Carolyn Plumer		
		51938 221st St		20
	CK#			2000
	ID#	Slenwood, da		αo
	ID#	Non Kenshaw,		_
i	CK#	57/67 2259 25		00
		Homeron Da		25
	ID#	O.S. Blasingame		
		TROBOL 69		20
Ī	CK#	10:0 0:4		1-00
	104	selver Cely, da		<i>&</i> 3
	ID#	Malcia Forber Rd		
	CK#	21708 Eastman Ker		2000
		ellenwood, Da.		35
07	ID#	19niha 1120 162	4	
1/12/		1002 41. Kinn		00
100/no	CK#	0 0		200
108	15.4	Henwood, da		050
	ID#	John Marshally		_
	CK#	1054691 'A21 ST		00
	OK#	Hom. Qa		20
		The state of the s	SUB-TOTAL	. 19 5 99
				\$245
		TOTAL (if last page	of this schedule)	
		, , , -	Ť	s

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page _____ of ____ (for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Mills (s. Nomoclatic ammittee)

SCHEDULE A (Rev. 02/96)	MONETARY RECEIPTS		
CHECK THIS BOX IF AMENDING FORM			

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT
RECEIVED (MM/DD/YR)	(if applicable)		TO CANDIDATE*	RECEIVED
(MINIOD/TR)	AND PAC CHECK NUMBER		(if applicable)	
0/	ID#	Lam WOLD.		
1/12/		Jonn Com		\$
108	CK#	Johnward		100000
1 7 0	ID#	Paul Longe mann		100
	CK#	faul Jennemann 64 Chestrut It		30
	CN#	Glenwood, Da Mike Harlow 21762 Eastmon Rd Glenwood, Da		1 1 5
	ID#	Mike Denlan		30
	CK#	21762 Eastmon Rd		20
		Glenwood, Da		30
	ID#			
]	CK#			·
	ID#			
Í	CK#			
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•	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	•		SUB-TOTAL	105

TOTAL (if last page of this schedule)

ve making a contribution to the

2. of 2

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
B (Rev. 08/96)	MONETARY EXPENDITURES

☐ CHECK THIS BOX IF AMENDING FORM

COMMITTE	E NAME (Must be .	same as on Statement of Organization)			
m	ille (o Comociatio	Consitter		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	CATEGORY* (SEE BELOW)	AMOUNT EXPENDED
9/13/08	ID# CK# /212	Lob Hubles	Campaign	/	\$ 200 00
	CK# /2 13	Slenwood Sibrary Glenwood Da	Kent		25
	ID# CK#	. *			
	ID# CK#				
	ID# CK#	,			
	ID# CK#				
	ID# CK#				
			SU TOTAL (if last page of the	B-TOTAL	\$11500

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

*Campaign funds may be used only for:

- (1) campaign purposes,
- (2) constituency expenses, and
- (3) educational and other expenses associated with duties of office.
- Please insert the applicable number in the category column for each expenditure.

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(i).)

Page